SUBMIT; COMPLETED APPLICATION, TAX Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Refund:		Amount Paid:	Date:	Permit #:
	の多方	#IR	5-26-16	プラングシン

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

Bayfield Co. Zoning Dept

PROJECT Legal Description: (Use Tax Statement) PIN: (23 digits) O2-51-07-33-4 O5-001-02-00 Volume Pag	on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/State/Zip):	Contractor Phone: Plumber:	Address of Property: City/State/Zip: Gity/State/Zip: GS1-3	Gregory Giles IS Irvine Park St Par, MN 55102	Owner's Name: Mailing Address: City/State/Zip: Telepho	TYPE OF PERMIT REQUESTED. TO LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. C
Pocyment: (i.e. Property Ownership	Written Authorization Attached Pes No	Plumber Phone:	651-307-2252	Open phone	Telephone:	□ B.O.A. □ OTHER

Section

L)

, Township

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N, Range

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lover

Acreage O, 760

	Property	☐ Run a Business on	/ Relocate (existing bldg)	> 26 000 ☐ Conversion	☐ Addition/Alteration	☐ New Construction	Value at Time of Completion * include donated time & * material	□ Non-Shoreland	X Shoreland → 😾 Is Propert	☐ Is Proper Creek or La
	▼ Foundation		(existing bldg) 🖺 Basement	on 🗷 2-Story		struction 🗆 1-Story			y/Land within 1000 feet	□ Is Property/Land within 300 feet of Forebeat or Landward side of Floodplain?
	dation	No Basement	ment	угу 🗆 🗆 🔝	☐ 1-Story + Loft ☐ Year Round	ry 🖟 🕱 Seasonal	# of Stories and/or basement Use		✓ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue →	Is Property/Land within 300 feet of River, Stream (incl. Intermittent) reek or Landward side of Floodplain? If yes—continue—
		□ None	-₹ -C		nd 🗆 2	1	# of bedrooms		Distance St	ļ
None	☐ Compost Toilet	☐ Portable (w/service contract)	Privy (Pit) or Vaulted (min 200 gallon)	🔀 Sanitary (Exists) Specify Type: [+]	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary Syste Is on the property?		ructure is from Shoreline : イタ、8 feet	Distance structure is from snoreline :
		ntract)	ulted (min 200 gallon)	cify Type: H	ify Type:	-	pe of iry System roperty?		⅓Yes □ No	Is Property in #
	1	1			X WeⅡ	☐ City	Water		⊠ Yes	Are Wetlands Present?

Existing Structure: (if permit being applied for is relevant to it) Proposed Construction:

Length:

38

C3

Width: Width:

2.

Height:

\$ C

Proposed Use	<	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	×	
	×	Residence (i.e. cabin, hunting shack, etc.)	42x18)) 1376
		with Loft	×	
Residential Use		with a Porch	So x feets	CANTO PETER 1
		with (2nd) Porch -5-3hand porch. See bings	(ifred X) 356
·		with a Deck	×	
		with (2 nd) Deck	×)
☐ Commercial Use		with Attached Garage	×	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	×	
		Mobile Home (manufactured date)	×	1
_		Addition/Alteration (specify)	×	
□ Municipal Use		Accessory Building (specify)	×	
-		Accessory Building Addition/Alteration (specify)	×)
				A STATE OF THE STA
		Special Use: (explain)	×)
		Conditional Use: (explain)	×)
		Other: (explain)	×)

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete, I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am Jare) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable timp for the purpose of papertion.

Owner(s):

(If there are Multiple Owners light the Country of the Sent and Agent and A

Secretarial Staff

MANY 25 2018
Address to send permit signing on behalf of the owner(s) a letter of authorization must accompany this application)

on the Deed All Owners must sign or letter(s) of authorization

must accompany this application)

Date

N

131/15

Attach
Copy of Tax Statement BY
If you recently purchased the property send your Recorded Decay
RSE SIDE

Hold For Sanitary: Signature of Inspector: Inspection Record: Condition(s):Town, Committee or Board Conditions Attached? Date of Inspection: Granted by Variance (B.O.A.) Nyes □ No Permit #: Permit Denied (Date): Issuance Information (County Use Only) Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense. Setback to Septic Tank or Holding Tank Setback to Drain Field Setback from the **West** Lot Line Setback from the North Lot Line Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Structure Non-Conforming Yes (Fused/Configuous Lot(s)).

Yes (Parcel of Record)

Yes (Fused/Configuous Lot(s))

Yes (PIET TO WAX WAY) Setback to Privy (Portable, Composting)

Prior to the placement or construction of a structure within ten (10) feet of the might previously surveyed corner or marked by a licensed surveyor at the owner's Setback from the East Lot Line Was Parcel Legally Created □ Yes □ No
Was Proposed Building Site Delineated □ Yes □ No Please complete (1) - (7) above (prior to continuing) existing R F grands (7) (6) (2) (1) (2) (3) (7) (6) (7) (7) (7) 6-080 8 moved to 9) 10cation Show any (*): Show any (*): Show: Show Location of: Show / Indicate: Show: Setbacks: (measured to the closest point) Show Location of (*): Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). as shown. NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code

The local Town, Village, City, State or Federal agencies may also require permits. Description 500 Draw or Sketch your Property (regardless of what you are applying for) のでとなったと Case #: 25 Hold For TBA: SCREALLYSO! Supporior 16-02B (*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20% Proposed Construction North (N) on Plot Plan Sanitary Number: 06-2685 Permit Date: Reason for Denial: Measurement 430 5, 22 7 2 75 0 Hold For Affidavît: ____ DEALTH OF THE Attached.) S S S W XX 0 Feet Feet Feet Feet Feet Feet Feet 51000 D(4.75.47) GHOMMY BURGANDON ナルスナ 2527 Previously Granted by <u>Yariance (B.O.A.)</u> □ Yes Xi_INo Mitigation Required Yes
Mitigation Attached Yes Setback from Wetland
20% Slope Area on property
Elevation of Floodplain シアとう Setback from the River, Stream, Setback from the Bank or Bluff Were Property Lines Represented by Owner
Was Property Surveyed Setback to Well Setback from the Lake (ordinary high-water mark) ary line from which the setback must be measured must be visible from records Changes in plans must be approved by the Planning & Zoning Dept. ₹ # of bedrooms: Hold For Fees: Description 76 L 160 □ □ 8 8 چ_{و []} Case #: 26 m-20 Affidavit Required Affidavit Attached Sanitary Date: 2 □ Yes Lakes Classification Date of Zoning District Date of Approval: Buck Point _ ഉ Measurement sly surveyed corner to the 256 REB 1-Sura 2 **E** 0 □ **□** □No □ □ 8 8 Feet Feet Feet Feet